

Cigarette smoking is the leading cause of preventable death in the U.S., accounting for nearly 1 in 5 deaths.¹ Reducing the prevalence of smoking is a health priority in Vermont. Healthy Vermonters 2020 (HV 2020) includes decreasing cigarette use in adults and increasing the proportion of current smokers who successfully quit or attempt to quit smoking as key objectives. This data brief summarizes results from the 2018 Behavioral Risk Factor Surveillance System (BRFSS) for selected indicators and demographic subgroups related to HV 2020.

In 2018, 15% of adults in Vermont reported current use of cigarettes and 57% of current smokers made a quit attempt in the last year. Less than 3% of VT adults reported current use of smokeless tobacco products. Data for e-cigarettes was not collected in the 2018 BRFSS survey.

KEY POINTS

- In 2018, 15 in 100 adult Vermonters were current cigarette smokers.
- Adult smoking prevalence in VT declined by 19% between 2016 and 2018.
- Native Americans smoke at three times the statewide rate.

Adult Smoking Prevalence & Quit Attempts in Vermont, 2018

	%	Estimated Vermonters [‡]
Cigarette Use	14.8 [†]	67,400
Smokeless Tobacco Use	2.6	12,900
Quit Attempts among Cigarette Users	56.6 [†]	38,500

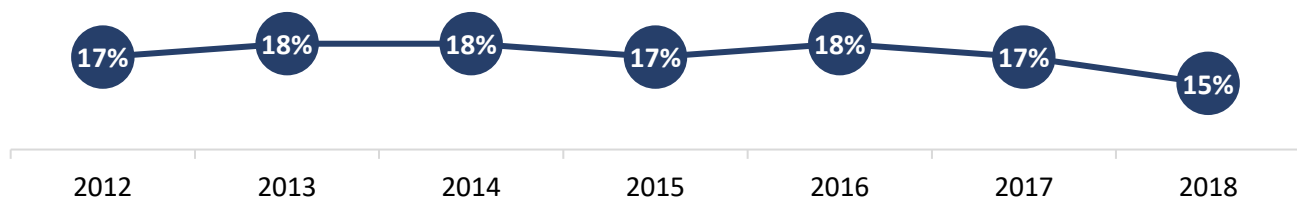
[†] Age adjusted to standard U.S. 2000 adult population according to healthy people guidelines

[‡] Estimated counts are rounded to the nearest hundred Vermonters and not age adjusted.

Source: VT BRFSS, 2018

Since 2016, the adult smoking prevalence in VT has significantly decreased 3.5% (19% relative change). Meanwhile, 2018 and 2017 values were not statistically different.

Trend in Smoking Prevalence Among Vermont Adults, 2012-2018 VT BRFSS



Prevalence data is age-adjusted to standard U.S. 2000 population according to healthy people 2020 guidelines

¹ https://www.cdc.gov/tobacco/data_statistics/fact_sheets/adult_data/cig_smoking/index.htm

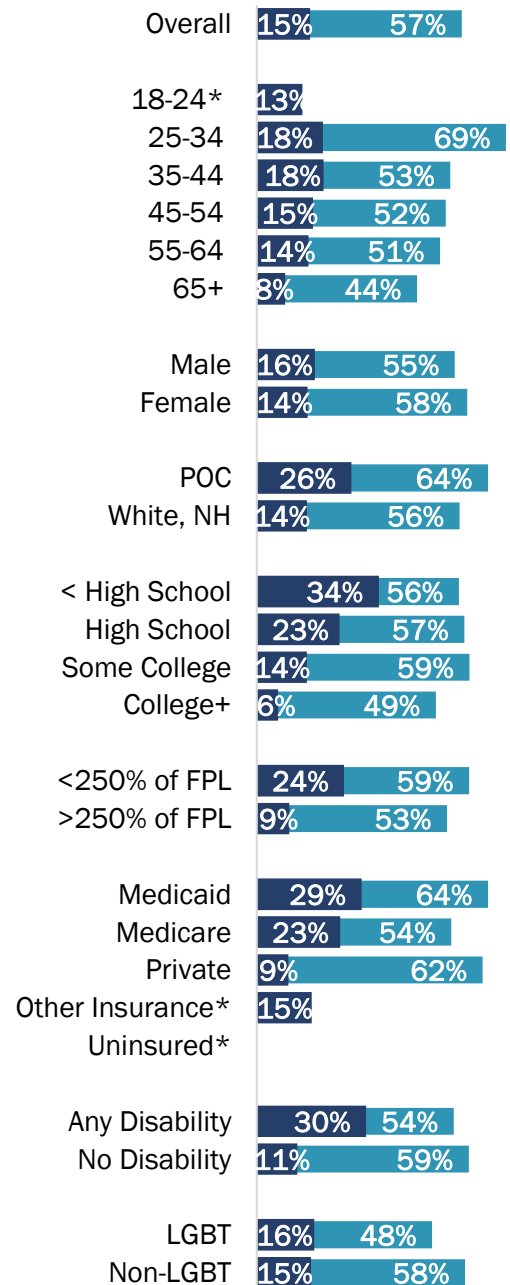
DEMOGRAPHICS

Smoking rates among VT adults significantly differ by age, race, education, income, insurance, and disability status.

- Cigarette smoking is significantly higher in adults ages 25-34 (18%) and 35-44 (18%) years compared to adults 65 years and older (8%).
- People of color (POC) have significantly higher rates of smoking than white non-Hispanic adults (26% vs 14%). Among POC, American Indians/ Alaska Natives reported the highest smoking prevalence. Nearly two in every five American Indians in VT are current smokers (data not shown).
- Smoking rates are significantly higher in adults with less than a high school education (34%) compared to adults with college education (5.9%).
- Adults living in households with income below 250% of the federal poverty level (FPL) have significantly higher smoking rates (24%) than those in households with income above 250% FPL (9%).
- Adults with Medicaid insurance continue to have significantly higher smoking prevalence (29%) compared to adults with private (9%) or other insurance (15%).
- The smoking rate among adults with any disability is three times that of those with no disability (30% vs 11%).
- There are no significant differences in smoking rates by gender and sexual orientation.
- Quit attempts are significantly lower (44%) in adults ages 65 years and older compared to other age groups. No other significant differences were noted by gender, race, education, income, insurance, sexual orientation or disability status.

Adult Smoking Prevalence and Quit Attempts by Demographic Characteristics, 2018 VT BRFSS

■ Current Smoking ■ Quit Attempts ;



Prevalence data on this page is age-adjusted to U.S. 2000 population according to healthy people 2020 guidelines. NH=Non-Hispanic; POC=People of color; FPL=Federal Poverty Level; LGBT=Lesbian Gay Bisexual Transgender
*Value has been suppressed due to small sample size.

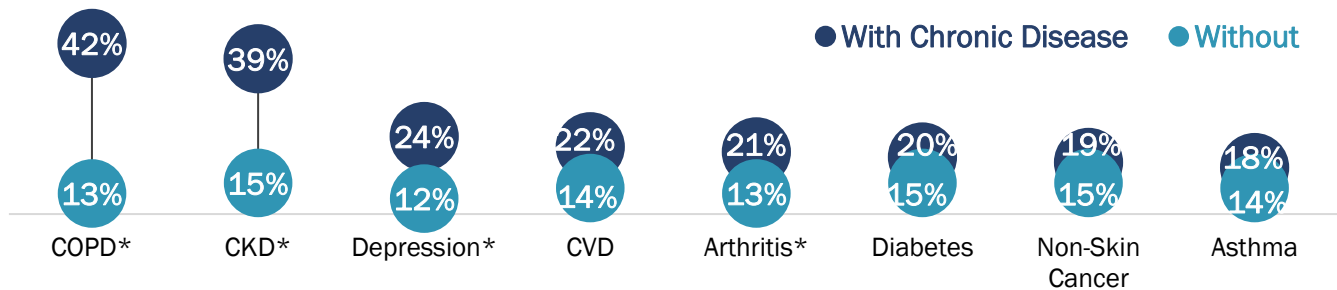
CHRONIC CONDITIONS AND HEALTH STATUS

In 2018, smoking prevalence remained higher in adults with certain chronic diseases.

- Adults with COPD are three times more likely to report current smoking than those without.
- Those with chronic kidney disease (CKD), arthritis and depression are two times or more likely to report current smoking than those without these conditions.
- There is no significant difference in smoking rates between those with cardiovascular disease (CVD), diabetes, non-skin cancer and asthma compared to adults without these conditions.

Current smokers are more than twice as likely to report fair to poor general health (27% vs. 12%), poor physical health (21% vs. 11%), or poor mental health (24% vs. 10%) compared to non-smokers.

Smoking Prevalence in Adults with Chronic Health Conditions, 2018 VT BRFSS



COPD=Chronic Obstructive Pulmonary Disease; CVD=Cardiovascular disease; CKD=Chronic Kidney Disease

SMOKING PREVALENCE BY COUNTY

Adult smoking prevalence ranged from 23% in Essex County to 12% in Chittenden County. Adult cigarette use in Chittenden County (12%) is significantly lower than the state average of 16% (2017-2018 combined data). No other regions differ significantly from the state average.

FOR MORE INFORMATION

Vermont Tobacco Data

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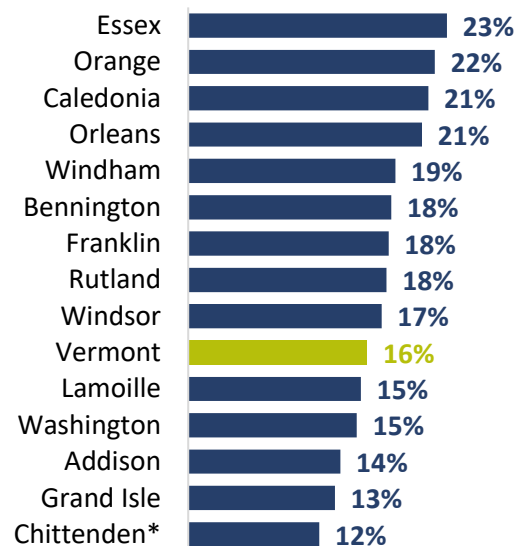
<https://www.healthvermont.gov/health-statistics-vital-records/surveillance-reporting-topic/tobacco>

Vermont Tobacco Control Program

802-863-7330 or tobaccovt@vermont.gov

<http://www.healthvermont.gov/wellness/tobacco>

Smoking Prevalence by County, VT BRFSS, 2017-2018



Prevalence data on this page is age-adjusted to U.S. 2000 population according to healthy people 2020 guidelines. Vermont and county rates are the average for 2017 and 2018.

* Indicates statistically significant difference.

Tobacco Use in VT: BRFSS, 2018

Adult Smoking Prevalence and Quit Attempts by Demographic Characteristics (VT BRFSS, 2018)

	Smoking Prevalence			Quit Attempts		
	%	Estimated Vermonters	Different from State Average	%	Estimated Vermonters	Different from State Average
Overall	14.8	67,400		56.6	38,500	
Age Group						
18-24 years*	12.6 ^{AB}	8,300		--	--	
25-34 years	18.2 ^A	13,000		68.8 ^{AB}	9,000	
35-44 years	18.5 ^A	12,400		53.4 ^{AB}	6,600	
45-54 years	15.5 ^A	11,400		52.2 ^{AB}	5,900	
55-64 years	14.2 ^A	12,800		50.6 ^{AB}	6,400	
65+ years	7.8 ^B	9,100	Yes	44.2 ^B	4,000	
Gender						
Male	16.0 ^A	35,400		54.7 ^A	19,600	
Female	13.6 ^A	31,900		58.1 ^A	18,900	
Race-Ethnicity						
White, non-Hispanic	13.9 ^A	58,800		56.0 ^A	33,000	
People of Color	26.1 ^B	7,400	Yes	63.8 ^A	4,700	
Education						
Less than high school	33.7 ^A	11,400	Yes	55.8 ^A	6,100	
High school	22.8 ^A	29,000	Yes	57.3 ^A	16,800	
Some college	13.9 ^B	17,800		58.7 ^A	10,800	
College or higher	5.9 ^C	9,100	Yes	49.4 ^A	4,800	
Federal Poverty Level						
<250% of FPL	24.1 ^A	38,400		58.5 ^A	22,500	
>250% of FPL	9.0 ^B	19,000		52.5 ^A	10,500	
Insurance Type						
Private	8.7 ^{AC}	22,000	Yes	62.3 ^A	13,100	
Medicare	23.1 ^{BC}	13,900	Yes	53.7 ^A	6,400	
Medicaid	28.9 ^B	16,400	Yes	63.8 ^A	10,400	
Other Insurance	15.2 ^C	2,900		61.8 ^A	2,100	
Uninsured*	--	--		--	--	
Disability Status						
No Disability	11.2 ^A	39,400	Yes	58.5 ^A	23,600	
Any disability	30.2 ^B	27,100	Yes	54.4 ^A	14,600	
Sexual Orientation						
Heterosexual/Cisgender	15.0 ^A	58,800		57.5 ^A	33,700	
LGBT	15.8 ^A	6,400		48.4 ^A	3,700	

†Percentages are age-adjusted to standard U.S. 2000 population according to Healthy People 2020 guidelines.

‡Estimated Counts are rounded to the nearest hundred Vermonters and are not age-adjusted.

-- Indicates data has been suppressed due to small numbers

A, B, C, D Groups within demographic categories that share a common letter are statistically similar to each other. For example, smoking among white, non-Hispanic adults and People of Color is significantly different, while quit attempts is similar.